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## APPLICANTS

Davood Khalili, Santa Clara, CA;

\*\* CONTINUING DATA \*\*\*\*\* *Jaw*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *Jaw*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>Met after Allowance</i>				
Verified and Acknowledged	<i>Examiner's Signature</i>	<i>Initials</i>			

## ADDRESS

DAVOOD KHALILI  
 P.O. BOX 743  
 SANTA CLARA, CA  
 95052

## TITLE

Laser pointer

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